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From: Greg Orme
Fax number: 61+ 07 33022469
Business phone:
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Date & Time: 4/21/2004 1:51:45 AM
Pages: 2
Re: revocation of attorney

Dear Sir/Madam,
Attached is my new address for service for case 09/514,031.

Regards,
Greg Orme.

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PTO/SB/82 (09-02)

Approved for use through 11/30/2005. OMB 0851-0035

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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/514,031
Filing Date	8-26-1998
First Named Inventor	GREG ORME
Art Unit	2613
Examiner Name	GEORGE DUGG
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

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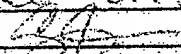
<input checked="" type="checkbox"/> Firm or Individual Name	HORACE CRATER				
Address	310 OAKWOOD COVE				
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City	LA VERGNE	State	TN	Zip	37086-4180
Country	USA				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	GREG ORME		
Signature			
Date	APRIL 20TH 2004	Telephone	617 341 8313 (AUS)

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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